

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		710098	12/11/00
RESPONSE FORMALITY REVIEW	Request	925	06-14-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	12/11/00
2	✓	✓	12/11/00
3	✓	✓	12/11/00
4	✓	✓	12/11/00
5	✓	✓	12/11/00
6	✓	✓	12/11/00
7	✓	✓	12/11/00
8	✓	✓	12/11/00
9	✓	✓	12/11/00
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11	✓	✓	12/11/00
12	✓	✓	12/11/00
13	✓	✓	12/11/00
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44	✓	✓	12/11/00
45	✓	✓	12/11/00
46	✓	✓	12/11/00
47	✓	✓	12/11/00
48	✓	✓	12/11/00
49	✓	✓	12/11/00
50	✓	✓	12/11/00

Claim	Final	Original	Date
51	✓	✓	12/11/00
52	✓	✓	12/11/00
53	✓	✓	12/11/00
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98	✓	✓	12/11/00
99	✓	✓	12/11/00
100	✓	✓	12/11/00

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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